

JUN 27 2006

PTO/SB/21 (09-04)

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FORM

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Total Number of Pages in This Submission

3

Application Number

10/631,218

Filing Date

July 25, 2003

First Named Inventor

Robert W. MCMILLAN et al.

Art Unit

2877

Examiner Name

Attorney Docket Number

01-07

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		
PTO/SB/82 (Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address) for Robert W. McMillan.		
PTO/SB/82 (Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address) for Ernest J. Holder.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	U.S. Army Space & Missile Defense Command		
Signature	<i>C. Joan Glisdorf</i>		
Printed name	Christine Joan Glisdorf		
Date	June 27, 2006	Reg. No.	43,635

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Typed or printed name	Christine Joan Glisdorf	Date	June 27, 2006

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002

PTO/SB/82 (01-06)

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**REVOCATION OF POWER OF
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NEW POWER OF ATTORNEY
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CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/631,218
Filing Date	July 25, 2003
First Named Inventor	Robert W. McMILLAN et al.
Art Unit	2877
Examiner Name	
Attorney Docket Number	01-07

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number: 50003

Please change the correspondence address for the above-identified application to:

The address associated with Customer Number: 50003

OR

Firm or Individual Name

Address

City

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I am the:

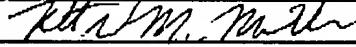
Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature



Name

Robert W. McMILLAN

Date

1 June 2006

Telephone

256-955-5418

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Application Number	10/631,218
Filing Date	July 26, 2003
First Named Inventor	Robert W. MCMILLAN et al.
Art Unit	2877
Examiner Name	
Attorney Docket Number	01-07

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

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I hereby appoint the practitioners associated with the Customer Number: 50003

Please change the correspondence address for the above-identified application to:

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50003

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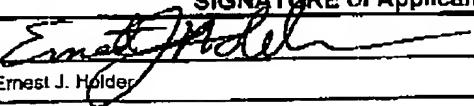
<input type="checkbox"/> Firm or Individual Name			
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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Ernest J. Holder		
Date	26 June 2006	Telephone	770 862 1451

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